SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

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APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

SEP Date of the last of the la 给  $\overline{G}$ 172015 œ m

ETTERE Refund: Permit #: Amount Paid: 1-18-6 1-18-8 9-21-15 0362 

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

			-		Municipal Use			☐ Commercial Use				🐰 Residential Use			Proposed Use		Existing Structure: (If permit being applied for is relevant to it) Proposed Construction:				3.000	\$ 7.00 >3	·T	Value at Time of Completion * include donated time & material	nupra ione-110M		Shoreland →		Section (C)	1/4,	PROJECT LOCATION	gent:	Contractor:	Address of Property: 十799万	Owner's Name:	TYPE OF PERMIT REQUESTED—>     LAND USE   SANITARY   PRIVY
				$\top$	Т			Use				Jse	0	**	· · · · · · · · · · · · · · · · · · ·		: (If permit bein		Property	☐ Run a Business on	☐ Relocate (existing bldg)	☐ Addition/Alteration	X New Construction	Project			is Property	ls Property	, Township	1/4	Legal Description:	(Person Signing Application on behalf	E SES	050	)AT SA	QUESTED—>
Other: (explain)	Conditiona	Special Use: (explain)	Accessory	Accessory Building	Addition/Alteration	Mobile Ho	Bunkhouse						Kesidelice	Principal St			ig applied for			ness on	sting bldg)	teration					Land within 1	Land within I	E	Gov't Lot		ation on behalf o	lš E	NAPS NAPS	ANTARIUS	DERMITS HAVE BEEN
lain)	Conditional Use: (explain)	:: (explain)	Accessory building Addition/Alteration (Specify)	Building (s	13	Mobile Home (manufactured date)	Bunkhouse w/ (☐ sanitary,	with Attached Garage	with (2 <sup>nd</sup> ) Deck	with a Deck	with (2 <sup>nd</sup> ) Porch	with a Porch	with Loft	Principal Structure (first structure on property)			s relevant to it		☐ Foundation	No Basement	· •	☐ 1-Story + Loft  2-Story		# of Stories and/or basement	William Control of the Control of th		s Property/Land within 1000 feet of Lake, Pond or Flowage	☐ Is Property/Land within 300 feet of River, Creek or Landward side of Floodplain?	N, Range	ıt Lot(s)	(Use Tax Statement)	f Owner(s))	<u> </u>	B	2.1	JSE SAN
	n)		ition/Aiter	(specity)	(specify)	ured date)	잌	ed Garage	eck		orch	3	THE SHALL	t structure	Prop				on	nent	•			nent .	10000000	If yescontinue	ke, Pond or	er, Stream (incl. Interm	8	MS2,	PIN: (23 digits)	Agent Phone	Contractor	Cry/state/Ap:	Mailing Address: $POBDX^{0}$	SANITARY
			ation (speci	1	a de la companya de l	***************************************	☐ sleeping quarters, <u>or</u>					To the state of th	v, etc.)	on property	Proposed Structure		Length:					Year Round	Seasonal	Use		ontinue 🛶		Stream (incl. Intermittent)  If yescontinue	SYGN.	Vol & Page	ts) 7- <b>44-</b> 05		" نز س		lress:	P 2
	The state of the s		γ)												ure		-			□ None		3 2		of bedrooms	WHI WASSING OF THE WA		Distance Structure	Distance Structure	) view		5-19-405	Agent Mailing A	Plumber:	Es tu	<del>-</del>	CONDITIO
					100	WWW.	cooking & food prep facilities)	The state of the s				The state of the s					Width:	(	Comp	□ Porta	1 1	\ Sanita	- 1		W. (10) P. (2) (10) (10) (10) (10) (10) (10) (10) (10					Blo	Oc.	ddress (include	told.		City/State/Zip:	AL USE
							facilities)								1	,	<u> </u>		Compost Toilet None	Portable (w/service contract)	Privy (Pit) or	Sanitary (Exists)	Municipal/City	What Ty Sewer/Sanita Is on the pr			is from Shoreline :	is from Shoreline : fee	rot.		C C Vol	≥ City/State/	<b>\</b>	54839	ESSE FINANCES	SPECIAL USE
-				- -	- -	- -								- (3)	Dim					ice contra	1	Specify Type:				feet		*	Lot Size	Subdivision:	Recorded Doc Volume			9	25 H	
>	<   ×	×	- ;	× >	< >	<   ×	: ×	×	×	×	×	×	× :	××	Dimensions		Height:			ict)	Vaulted (min 200 gallon)	Type:		oe af ny System aperty?	3737413130000000000000000000000000000000	□ No	☐ Yes	ls Property in Floodplain Zone?		-	ument: (i.	□ A S	Pl	6	242 Le	□ B.O.A.
,	- -			- -	- -	- -	_	·  _		-	-		<u>- </u> -	-			nt:				00 gallon)	26.5							Acreage		e. Propert Page(s)	Written Aut Attached  Yes	Plumber Phone:	84-81	Telephone:	OTHER
	- Introduction		and the second s						and control of the	T. W. C.					Footage	2000	٥			<u>L</u>		□ E WE	□ City	Water		□No	□ Yes	Are Wetlands Present?	73		Document: (i.e. Property Bywaership)	Written Authorization Attached Ves Vo	one:	608-418-0252		1ER

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I(we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described properly at any reasonable time for the jurpose of inspection. Owner(s): Symully (If there are Multiple Owners listed on the Carollenies Deed All Owners must sign or letter(s) of authorization must accompany this application) Thrus) 5 Dantahuse Date 9/17 5

Authorized Agent:

Address to send permit

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accompany this application) Date

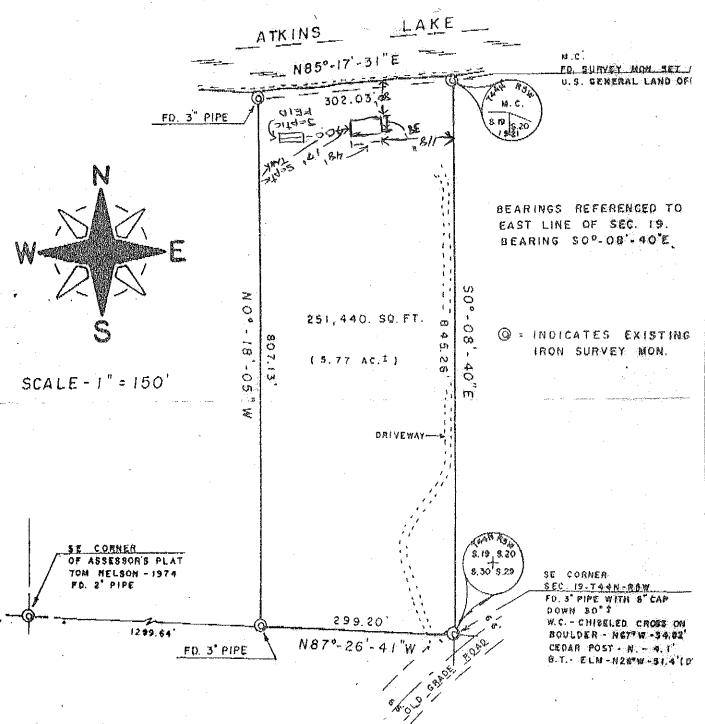
Hold For Sanitary   Hold For TBA:	Property owner is contacting UDC.	Date of Inspection:  Condition(s): Town, Committee or Board Conditions Atta	Inspection Record:	Was Parcel Legally Created Nyes □ No Was Proposed Building Site Delineated Nyes □ No	Granted by Variance (B.O.A.) (1) Yes \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Is Parcel a Sub-Standard Lot   Yes (Deed of Record)   S Parcel in Common Ownership   Yes (Fused/Contiguous Lot(s))   S Structure Non-Conforming   Yes   Yes	Date	NOTICE: All Land Use Perm For The Construction Of New One & The local T	ं ली का	Prior to the placement or construction of a structure within ten (10) feet of the minimum requester previously surveyed comer or marked by a licensed surveyor at the owner's expesse. Prior to the placement or construction of a structure more than ten (10) feet but less than the	Setback to <b>Drain Field</b> Setback to <b>Privy</b> (Portable, Composting)	Setback to Septic Tank or Holding Tank	Setback from the South Lot Line Setback from the West Lot Line Setback from the East Lot Line	Setback from the North Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)		(1) Show Location of: Proposed (2) Show / Indicate: North (N) (3) Show Location of (*): (*) Drivev (4) Show: All Existin (5) Show: (*) Well () (6) Show any (*): (*) Lake; (7) Show any (*): (*) Wetlan	Jow: Draw or Sketch your Property (19
Hold For Affidavit:	ੇ ਕਿ	Attached? Yes No -(If No they need to be attached.)		Were Property Lines	Previousiy Gra	ord) N.No Mitigation Required N.No Mitigation Attached	Reason for Denial:	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling. The local Town, Village, City, State or Federal agencies may also require permits.  Sanitary Number: 7 (2) # of bedrooms: 2 Sanitary	Report at the owner's expense.  Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT)	uired setback, the boun	Feet	Feet Setback t	Feet Feet		Feet Setback fro	Measurement	ing) est point}		Proposed Construction  North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road)  All Existing Structures on your Property  (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*)  (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond  (*) Wetlands; or (*) Slopes over 20%	Draw or Sketch your Property (regardless of what you are applying for)
Hold For Fees:			AHVIOLOGE	erty Lines Represented by Owner Wes Was Property Surveyed Yes	Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	quired □ Yes \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		Jance if Construction or Use has not begun- re Required To Enforce The Uniform Dwellin s may also require permits.  # of bedrooms: ?    Sanitary	T), Drain field (DF), Holding Tank (HT), Pri	dary line from which the setback must be measured must be visible from linimum required setback, the boundary line from which the setback must be measured for the proposed of		Well	20% Slope Area on property Elevation of Floodplain	The Workland	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Sethack from the Bank or Bluff	Description	Changes in plans must be approved by t		ge Road) DF); (*) <b>Holding Tank</b> (HT) and/or (*) <b>Priv</b>	
Then	Date of Approval:	r ke-inspection:	Zoning District ( & ) Lakes Classification ( )			Required Yes No Attached Yes No	cro f	ng Code.	Privy (P), and Well (W).	from one previously surveyed corner to the must be measured must be visible from		3○ Feet	3	A NA Fact	Feet Feet	ement	by the Planning & Zoning Dept.		Privy (P)	

## PLAT

OF

## SURVEY

OF THE EAST 300 FEET OF GOV'T. LOT 8, SEC. 19-T44N-R5W, TOWN OF GRANDVIEW, BAYFIELD CO., WIS.



SURVEYED FOR =

SYBÊNIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58 Washburn, WI 54891 (715) 373-6138

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APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
Date Startle (Received)

Ã 70205 m

Baylield Co. Zoning Dept

ENTERED Refund: Date: **Amount Paid:** ermit #: 0358 21-15

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.	TARRAM AMERICAN AMERI	A CONTRACTOR OF THE CONTRACTOR
TYPE OF PERMIT REQUESTED—▶ ☐ LAND USE ☐ SA	TYPE OF PERMIT REQUESTED—► ☐ LAND USE ☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE ☐ B.O.	□ B.O.A. □ OTHER
Owner's Name:	,	Telephone:
Mahouala	6045 232 alst W. Ferribault/11/155021	02 507-330-1319
operty:	City/State/Zip:	Cell Phone:
	Iron River WI 54847	501-570-131
Contractor:	Contractor Phone: Plumber:	Plumber Phone:

Authorized Agent: (Person Signing Application on behalf of Owner(s))

Agent Phone:

Agent Mailing Address (include City/State/Zip):

/State/Zip): Written Authorization
Attached
Pes © No
Recorded Document: (i.e. Property Ownership)
Volume Page(s) 7 3

PROJECT LOCATION

Legal Description:

(Use Tax Statement)

PIN: (23 digits)

2-47-08-13-1 04-000 po

Gov't Lot

Lot(s)

CSM

Vol & Page

Lot(s) No.

Block(s) No.

Subdivision:

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1/4,

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1/4

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	ive	Distance Structure is from Shoreline:	Is Property in	Are Wetlands
	Creek or Landward side of Floodplain? If yescontinue		Floodplain Zone?	Present?
☐ Shoreland —▶	$\square$ Is Property/Land within 1000 feet of Lake, Pond or Flowage	Distance Structure is from Shoreline:	_ ⊔ Yes	 √ Ps
	If yescontinue	reet	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
X,Non-Shoreland				

			X X	> /6/000	} }		Value at Time of Completion * include donated time & material
	Property	🗌 Run a Business on	Relocate (existing bldg)	□ Conversion	☐ Addition/Alteration	□ New Construction	Project
	□ Foundation	□ No Basement	□ Basement	¯□ 2-Story	1-Story + Loft	□ 1-Story	# of Stories and/or basement
						X Seasonal	Use
- Paragraphia -		□ None	A lost	_ မ	□ 2	1	# of bedrooms
X None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	☐ Sanitary (Exists) Specify Type:	□ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
	1	1	none	 ;	□ Well	City	Water

11:-1-1		ongth:	Description.
Width: Height:	() Width:	Length:	Existing Structure: (if permit being applied for is relevant to it)

Proposed Use	<	Proposed Structure	Dimensions	sions	Square Footage
and the state of t		Principal Structure (first structure on property)	( ×	)	
	×	Residence (i.e. cabin, funnting shack) etc.)	02 × 02.	000	0 0 7
-	7		<b>100 0</b> ×20	20 )	
Residential Use		with a Porch	ر کر X	×20 )	100
		with (2 <sup>nd</sup> ) Porch	×	_	
		with a Deck	×	)	
		with (2 <sup>nd</sup> ) Deck	×	)	
☐ Commercial Use		with Attached Garage	×	_	
		Bunkhouse w/ (□ sanitary, or □ sleeping quarters, or □ cooking & food prep facilities)	x		
		Mobile Home (manufactured date)	×		
		Addition/Alteration (specify)	×	_	
Municipal Use		Accessory Building (specify)	×	-	
-		Accessory Building Addition/Alteration (specify)	( χ	_	
The state of the s				- Participation of the Partici	
Rec'd for Issuance		Special Use: (explain)	( x		
in-three hiden property		Conditional Use: (explain)	( x	-	
	3	Other: (explain)	×		

FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES and accompanying information) has been examined by me (us) and to the bast of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the described property at any reasonable time for the purple of inspection. Mari

Maharald

Date

V

Authorized Agent: Owner(s): Sylvation 2004 Water 2005 (If there are Multiple Owners listed on the Deed All Owners must sign or lethons) of authorization must accompany this application)

Owner(s):

Address to send permit

you are signing are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Mahowald 6045 232nd S+W; Fariau H;

Date

Mill Copy of Tax Statement purchased the property send your Recorded Deed ® October 2013

STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received) S Ju -**3**205 Tir

Permit #: Refund: Date: Amount Paid: S1-18-6 S2.18 1-21-15

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS:

Saylied Co. Zoning Dep

☐ is Bronorty/I and within 300 feet of River Stream (incl. Intermittent) ☐ Distance Structure is from Shoreline:	Section 28 , Township 47 N, Range 8 W	1/4,1/4 Gov't Lot (s)	PROJECT Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor: Contractor Phone: Plur River Bur Bur 715 372 4878	Address of Property:	3	TYPE OF PERMIT REQUESTED—▶ ☐ LAND USE ☐ SAI	TO WOL WHAT CONSINCTION ON IT ALL FRANCIS HAVE BEEN BOOKS TO ATTACKNIC.
er Stream (incl Intermitte		Lot(s) CSM Vol & Page 7794 248	04-074-7-47-08-08-45-003-04000	Agent Phone:	Contractor Phone: 2 7/5 37み 48	INON RIVER, WI, 5+847	Mailing Address: City/State/Zip: 548	☐ SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE	S Sale L. Christophysical C v.
Distance Struct	IRN RIVER	ge Lot(s) No.	300-47-80-8	Agent Mailing Address (include City/State/Zip):	Plumber:	2+5 Im	City/si	CONDITIONAL	
ure is from Shore		Block(s) No.		ess (include City/St	NIA	747	City/State/Zip:	USE   SPECIA	
line:	Lot Size	Subdivision:	Recorded Documen	ate/Zip):			Chy		
A	Acreage		Document: (i.e. Property Ownership) Page(s)	Written Authorization Attached Yes No	Plumber Phone:	715 817-0990		□ B.O.A. □ OTHER	

QQ

X Shoreland  ☐ Non-Shoreland  ☐ Value at Time of Completion * include donated time & material  \$ 1,000. 193	Creek or Landward side of Floodplain?   f yescontinue	# of Stories and/or basement  1-Story + Loft  2-Story	If yescontinue →  Pond or Flowage If yescontinue →  Use  If yescontinue →  Use  The seasonal of the	Distance Stru	# What Type of Sewer/Sanitary Specify Type:	Floodplain Zome?  These No  Pe of ry System operty?  ify Type:  ify Type:  Cify Type:  Syrnc Sys	Present?  ☐ Yes  Water    City   S. Well
			•	٦,			
T	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 141.					
	☐ Addition/Alteration	☐ 1-Story + Loft	Year Round	□ 2	(New) Sanitary Spec	ify Type:	
	☐ Conversion	☐ 2-Story		□ 3	Sanitary (Exists) Spec	cify Type: ショアアで 5代	
	Relocate (existing bldg)	☐ Basement			☐ Privy (Pit) or Vaulted (min 200 gallon)	ulted (min 200 gallon)	
	☐ Run a Business on	□ No Basement		> None	☐ Portable (w/service contract)	ntract)	
	Property	☐ Foundation			☐ Compost Toilet		ı
	* Raw King	THOUSE STATES SE	87		□ None		
	できたるが						
Existing Structure:	Existing Structure: (if permit being applied for is relevant to it)	r is relevant to it)	Length: 16		Width: 8	Height: う	
Proposed Construction:	ction:		Length: /6		Width: 8/	Height: 101	

Proposed Use	<b>,</b>	Proposed Structure	Dimensions	Square Footage
		Principal Structure (first structure on property)	( x	)
		Residence (i.e. cabin, hunting shack, etc.)	( x	_
•		with Loft	×	
X Residential Use		with a Porch	( x	)
		with (2 <sup>nd</sup> ) Porch	( X	)
		with a Deck	( ×	}
		with (2 <sup>nd</sup> ) Deck	( x	)
☐ Commercial Use		with Attached Garage	( x	
		<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	( x	)
		Wobile Home (manufactured date)	×	_
		Addition/Alteration (specify)	×	_
Municipal Use		Accessory Building (specify)	×	
		Accessory Building Addition/Alteration (specify)	×	
		Special Use: (explain)	×	
		Conditional Use: (explain)	×	_
	×	Other: (explain) BOAT HOUSE/STORAGE BULLPING	9 x 1/2	128

Nowner(s): FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

ry accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) y of all information I (we) am (are) providing and that It will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the purpose of inspection. Millonie Date 5/18

9520 Mc CARRY CAKE

Authorized Agent:

(If there are Multiple

he Deed All Owners must sign or letter(s) of autho

must accompany this application)

Address to send permit

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Á

D

LON RIVER (3) 64845

Mtach
Copy of Tax Statement
If you recently purchased the property send your Recorded Deed

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Permit #: Date:

Refund:

[TT] (5-2) (FIT) Commence 

(If there ed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

are signing on behalf of the

owner(s) a letter

to send permit

Sult of Ba	SED 9 / 2015	Hec d for Issuance	The second secon	-					commercial use				M Residential Use				Proposed Use	Proposed collso action.	Existing Structure: (If permit being applied for is relevant to it)	4		Run		S Con		Wew Knew	ion e &	Non-Shoreland	Asini elaim — 🗆 Is Pi	7	□ls Pa	Section CQ_, To	0	1/4,		PROJECT Legal L		Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor:	スペイン	Address of Property:	7	Type of PerMIT REQUESTED		DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
FAILURE T in (including any accompar all and accuracy of all informants of the information of	Other: (explain)				Accesson Accesson	-	<del> </del>	$\vdash$	ļ					The state of the s	Residenc	0000	<b>\</b>		mit being applied fo	The second secon	rioperty	Run a Business on	Relocate (existing bldg)	Conversion	☐ Addition/Alteration	New Construction	Project (What are you applying for)		roperty/Land withir	Creek of Lainwaid side of Floodbann	roperty/Land within	, Township <u>XY</u> /N, Range		1/4 Governor	<del>"</del> Ι	Legal Description: (Use Ta		ng Application on behalf	~ .	· RU (			D→ LAND USE		ITIL ALL PERMITS HAV
O OBTAIN A PERIMIT or sying information) has been mation I (we) am (are) providation I	explain)	Conditional Use: (explain)	Special Use: (explain)		Accessory Building (specity) CAY S	7		Bunkhouse w/ ( sanitary,	With Attached Garage	with (z ) beck	With a Deck	with (2 ) Porch	with a Porch	with Loft		Principal Structure (first st			or is relevant to it)	h	× Stab	No Basement	1	☐ 2-Story		□ 1-Story	# of Stories and/or basement		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	a coopean.	liver, S		D	Lot(s)		(Use Tax Statement) 04-		_		TBD)	Cir	رہ	9373		E DECIS GOOGO TO METE
STARTING CONSTRUCT examined by me (us) and i iding and that it will be reline in or with this applicat	11100000000000000000000000000000000000	ANN AND AND AND AND AND AND AND AND AND	and their		מון ק <u>ּ</u>	7	d date)	or □ sleeping quarters,	Garage		·				ng shack, etc.)	(first structure on property)	Proposed Structure	20.00	Length:					<del>   </del>	t 🕅 Year Round	☐ Seasonal	Д Use		l 1		itream (incl. intermitten	TROM	Town of:	CSIMI VOI OL PARCE		<u>PIN</u> : (23 digits) 04- 024-2-47	The state of the s	Agent Phone:	Contractor Phone:		ate/Zip:	721 Queen	Mailing Address:		
ION WITHOUT A PERIVE to the best of my (our) know ied upon by Bayfield Courlion. I (we) consent to court			***************************************		ecify)		- International Control of Contro	임							1	ty)	cture		27			» None			d   🗆 2		bedrooms		Distance Structure	+	nt) Distance Structure	on Brace	1	in tooks) No.	lattel N	3		Agent Mailing Add	Plumber:		777	Cati-	City/s	SPECIAL USE REGAL OTHER	1
IIT WILL RESULT IN PE owledge and bellef it is truently in determining wheth							A Paragraphic Control of the Control	cooking & food prep facilities)			- Anna Anna Anna Anna Anna Anna Anna Ann		trategrame and the state of the						Width: 2x		None	Compost Toilet	Privy(Pit) or		☐ (New) Sanitary	1 1	Sewe Is a		ture is from Shoreline :	- 11	ture is from Shoreline :				Riockis) No	100-50	-	Agent Mailing Address (include City/State/Zip):				2	Zip:	Wee Special lise	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
NALTIES  Je, correct and complete er to issue a permit. I (volume)		×	` X	-		CX CHI	\ \ \ \ \ \	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-	×	×	~	×	×	×	( ×	Dimensions		Σ I			let	or   Vaulted (m	<u> \$</u>	Y Specify Type:		What Type of Sewer/Sanitary System Is on the property?	- Tribition	<b>—</b>		14	100×910			ë II	Recorded Documer	□ Yes □ No	ate/Zip):			- 1	rove I/	וא	VIISE □ BOA	`
and complete. I (we) acknowledge that I (we) a permit. I (we) further accept liability which ering county ordinances to have access to the		_	)			0 -			-		_ -	}			_				Height: 22				Vaulted (min 200 gallon)				3			∏ Yes □		2.14	Acreage			it: (i.e. Property Ownership) Page(s) 824-578	☐ Yes ☐ No	Written Authorization	Plumper Fnone.	630-258-7849	Cell Phone:		윤	A OTHER	
nat I (we) ity which ss to the						- 1											Footage	6	8				1	,	□ Well	□ City	Water		No (	□Yes	Are Wetlands Present?		*			vnership)		zation		349					

Attach
Copy of Tax Statement
Try purchased the property send your Recorded Deed

Date

2015

Please complete (1)—(7) above (prior to continuing)  (8) Setbacks (measured to the closest point)  (9) Setback from the Contentine of Platted Road  (1) 10 Feet Setback from the Established Right of Way  (1) 10 Feet Setback from the Bank of Bight of Way  (2) Feet Setback from the Bank of Line Setback from the Bank of Bight of Way  (3) Feet Setback from the Bank of Line Setback from the Bank of Bight S	(1) Show Location of: Proposed Construction (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%
lanning & Zoning Dept.  Measurement  Measurement  Feet	

